

## ISSUE SLIP STAMP AREA (for additional cross references)

POSITION <b>BEST</b>	INITIALS <b>ABLE COPY</b>	ID NO.	DATE
FEE DETERMINATION	<i>h</i>		<i>10/02/01</i>
O.I.P.E. CLASSIFIER			<i>11/15/01</i>
FORMALITY REVIEW	<i>un</i>	618	
RESPONSE FORMALITY REVIEW	<i>pr</i>	1019	<i>03/25/02</i>

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	02/07
2	✓	✓	02/07
3	✓	✓	02/07
4	✓	✓	02/07
5	✓	✓	02/07
6	✓	✓	02/07
7	✓	✓	02/07
8	✓	✓	02/07
9	✓	✓	02/07
10	✓	✓	02/07
11	✓	✓	02/07
12	N	N	N
13	N	N	N
14	N	N	N
15	✓	✓	02/07
16	N	N	N
17	N	N	N
18	N	N	N
19	N	✓	02/07
20	✓	✓	02/07
21	✓	N	✓
22	✓	✓	02/07
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Claim	Final	Original	Date
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REC'D - JCS/LS/C  
03/25/02

If more than 150 claims or 10 actions  
staple additional sheet here

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